

PUBLIC HEALTH DEPARTMENT[641]

Adopted and Filed

Rule making related to organization of committees and councils

The Public Health Department hereby amends Chapter 88, “Volunteer Health Care Provider Program,” Chapter 90, “Iowa Child Death Review Team,” Chapter 110, “Center for Rural Health and Primary Care,” Chapter 130, “Emergency Medical Services Advisory Council,” and Chapter 138, “Trauma System Advisory Council,” and rescinds Chapter 186, “Governmental Public Health Advisory Council,” Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is adopted under the authority provided in Iowa Code chapter 147A and 2019 Iowa Acts, House File 766, sections 66, 70, 72, 73, 74, 78, 82, and 84.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code chapter 147A and 2019 Iowa Acts, House File 766, sections 66, 70, 72, 73, 74, 78, 82, and 84.

Purpose and Summary

2019 Iowa Acts, House File 766, repeals the Iowa Code section that established the Iowa Collaborative Safety Net Provider Network. The amendments to Chapter 88 remove the definition for “specialty care referral network” because the network no longer exists (Item 1), amend the definition of “specialty health care provider office” to remove the reference to the Iowa Collaborative Safety Net Provider Network (Item 2), and rescind subrule 88.5(3) due to the elimination of the referenced specialty care referral network (Item 3).

2019 Iowa Acts, House File 766, section 82, amends Iowa Code section 135.43(2) to remove a sentence that stated, “The members of the team are eligible for reimbursement of actual and necessary expenses incurred in the performance of their duties.” Item 4 of this rule making rescinds rule 641—90.7(135) related to expenses of the team members due to the removal of the underlying statutory authority.

2019 Iowa Acts, House File 766, section 70, removes the statutory authority for the establishment of an advisory committee to the Center for Rural Health and Primary Care. The amendments to Chapter 110 (Items 5 to 7) rescind the rules regarding the advisory committee’s definition, purpose, organization, and meetings. The amendments also remove the identification of the specific bureau in which the Center for Rural Health and Primary Care is located and instead only note that the center is located within the Department of Public Health.

2019 Iowa Acts, House File 766, section 84, removes the statutory requirement allowing for reimbursement of expenses for members of the Emergency Medical Services Advisory Council. Due to this change, expenses can no longer be paid. Item 8 removes the rule in Chapter 130 that describes which and at what rates expenses are reimbursed.

2019 Iowa Acts, House File 766, section 78, amends Iowa Code section 147A.24(2) to state that the Trauma System Advisory Council shall consist of seven members. Prior to this legislative change, each organization or entity named in Iowa Code section 147A.24(1) could be represented on the Council. The number of members was previously undefined and could be represented as high as the total number of organizations or entities named in that Iowa Code section. The amendment in Item 9 clarifies that the Director of the Department of Public Health shall select the seven members from the pool of nominated persons recommended by the listed organizations and entities.

2019 Iowa Acts, House File 766, section 84, amends Iowa Code section 147A.3 to remove the ability to pay for advisory council member expenses. The amendment in Item 10 rescinds rule 641—138.9(147A) regarding expense reimbursement.

2019 Iowa Acts, House File 766, sections 72 through 74, remove all references to the Governmental Public Health Advisory Council from the Iowa Code, and House File 766 also removes the underlying statutory authority for Chapter 186. The amendment in Item 11 rescinds Chapter 186.

Public Comment and Changes to Rule Making

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on July 17, 2019, as **ARC 4539C**. No public comments were received. No changes from the Notice have been made.

Adoption of Rule Making

This rule making was adopted by the State Board of Health on September 11, 2019.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to the Department's waiver and variance provisions contained in 641—Chapter 178.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on November 13, 2019.

The following rule-making actions are adopted:

ITEM 1. Rescind the definition of "Specialty care referral network" in rule **641—88.2(135)**.

ITEM 2. Amend rule **641—88.2(135)**, definition of "Specialty health care provider office," as follows:

"*Specialty health care provider office*" means the private office or clinic of an individual specialty health care provider or a group of specialty health care providers as referred by the Iowa Collaborative Safety Net Provider Network established in Iowa Code section 135.153 but does not include a field dental clinic, a free clinic, or a hospital.

- ITEM 3. Rescind subrule **88.5(3)**.
- ITEM 4. Rescind and reserve rule **641—90.7(135)**.
- ITEM 5. Amend rule 641—110.1(135) as follows:

641—110.1(135) Purpose and scope. The following rules developed by the department of public health govern the organization of the center for rural health and primary care within ~~the bureau of oral and health delivery systems of the department of public health.~~

ITEM 6. Rescind the definition of “Center for rural health and primary care advisory committee” in rule **641—110.2(135,135B)**.

ITEM 7. Rescind and reserve rules **641—110.4(135)** to **641—110.6(135)**.

ITEM 8. Rescind and reserve rule **641—130.7(147A)**.

ITEM 9. Amend rule 641—138.3(147A) as follows:

641—138.3(147A) Appointment and membership.

138.3(1) The seven members of the TSAC shall be appointed by the director from the recommendations of the organizations listed in subrule 138.3(4).

138.3(2) Appointments shall be for two-year staggered terms, which shall expire on June 30.

138.3(3) Vacancies shall be filled in the same manner in which the original appointments were made for the balance of the unexpired term.

138.3(4) Membership. The voting membership of the TSAC shall be comprised of ~~one representative nominated~~ seven members, appointed by the director, who are selected from the pool of individuals recommended from each of the following organizations or entities:

- a. American Academy of Pediatrics.
- b. American College of Emergency Physicians, Iowa chapter.
- c. American College of Surgeons, Iowa chapter.
- d. Department of public health.
- e. Governor’s traffic safety bureau.
- f. Iowa Academy of Family Physicians.
- g. Iowa Emergency Medical Services Association.
- h. Iowa Emergency Nurses Association.
- i. Iowa Hospital Association representing rural hospitals.
- j. Iowa Hospital Association representing urban hospitals.
- k. Iowa Medical Society.
- l. Iowa Osteopathic Medical Society.
- m. Iowa Physician Assistant Society.
- n. Iowa Society of Anesthesiologists.
- o. Orthopedic System Advisory Council of the American Academy of Orthopedic Surgeons, Iowa representative.
- p. Rehabilitation services delivery representative.
- q. Iowa’s Medicare quality improvement organization.
- r. State medical examiner.
- s. Trauma nurse coordinator representing a trauma registry hospital.
- t. University of Iowa, Injury Prevention Research Center.

138.3(5) Absences.

a. Three unexcused absences in a 12-month period shall be grounds for the director to ~~request nomination of~~ consider an alternate representative to fill the position.

b. Absences may be excused by notification provided to the chairperson prior to the meeting.

c. The chairperson of the TSAC shall be charged with providing notification of absences to the department.

ITEM 10. Rescind and reserve rule **641—138.9(147A)**.

ITEM 11. Rescind and reserve **641—Chapter 186**.

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EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 10/9/19.